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transmitted to the USPTO (571) 273-2885, on the date indicated below. LADAS & PARRY LLP 224 SOUTH MICHIGAN AVENUE **SUITE 1600** CHICAGO, IL 60604 <u>Iose</u>ph P. Krause April 1 2006 (Date FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE CU-3292 RJS 6323 07/14/2003 10/619.277 June Kook Park TITLE OF INVENTION: LIQUID CRYSTAL DISPLAY AND METHOD FOR DRIVING THE SAME 04/12/2006 CNGUYEN1 00000060 120400 18619277 01 FC:1501 1400.00 DA TOTAL FEE(S) DUE APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE DATE DUE NO \$1400 \$300 \$1700 06/23/2006 nonprovisional ART UNIT CLASS-SUBCLASS EXAMINER HOLTON, STEVEN E 345-098000 Change of correspondence address or indication of "Fcc Address" (37 CFR 1.363). 2. For printing on the patent front page, list LADAS & PARRY LLP (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) anached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agenta. If no name is "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print of type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) BOE-HYDIS TECHNOLOGY CO., LTD. Kyoungki-do, Republic of Korea Please check the appropriate assignce category or categories (will not be printed on the patent): 🔲 Individual 💢 Corporation or other private group entity 🚨 Government The following fee(s) are enclosed: 4b. Payment of Fee(s): Issue Fee \$1400 Publication Fee (No small entity discount permitted) \$300 ☐ A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached.

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